## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthami

Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #** 

P95000090985 (9)

PB AFFORDABLE TRANSPORTATION, INC.

**FILED** Apr 25, 1996 08:00 AM **Secretary of State** 



| Principal Place of Business 1960 W 9 STREET BAY #1-A RIVIERA BEACH FL 33404   |   |                     | Making Address<br>1960 W 9 STREET BAY <b>#1-A</b><br>RIVIERA BEACH FL 33404   |  | Date Incorporated or Qualified     3a. Date of Last Report     1/28/1995 |                  |                  |                        |
|---|---|---------------------|---|--|--|------------------|------------------|------------------------|
|   |   |                     |   |  |  |                  |                  |                        |
| 2. Principal Plac   |   | 2a. Mailing Address | off ci  |  | 4. FET Number 65-062-801   | 2                | <u> </u>         | applied For            |
| 1 7   | W 9th St.   | 26 1960 W           | 7- 57.  |  | 63-062801  |                  |                  | lot Applicable         |
| Suite Apt. #,   | ./ —  | Suite Apt. #, etc.  | 17  |  | 5. Certificate of Status Desired   |                  |                  | Additional<br>Required |
| 22 <u>13 ay</u>   | #/  | 27 13 Cry #         |   |  | 6. Election Campaign Financing   |                  |                  | May Be                 |
| City & State  |   | 28                  |   |  | Trust Fund Contribution  |                  |                  | to Fees                |
| Zip   | Country   | Zip                 | Countr  | у  | 8. This corporation has liability for                                    | intangible tax i | under s          | 199.032,               |
| 24  | 25  | 29                  | 30  |  |  | Mo               |                  |                        |
| <u> </u>  | 9. Name and Address of Currer                             | nt Registered Agent |   |  | 10. Name and Address of New F  | Registered Ag    | ent              |                        |
|   |   |                     | 81  | 1 Name   |  |                  |                  |                        |
|   | , STANLEY   |                     | 82  | 2 Street Aodr  | dress (P.O. Box Number is Not Acceptable)                                |                  |                  |                        |
|   | TURA ST STE 1417  |                     | <u></u>   |  |  |                  |                  |                        |
| WEST  | PALM BEACH FL 33401                                       |                     | 8:  | 3  |  |                  |                  |                        |
|   |   |                     | 84  | 4 City   |  | FL               | <b>85</b> Zıp    | Code                   |
|   |   |                     |   | _ <u>L</u>   | ration submits this statement for the pu                                 |                  |                  |                        |
| 12.   | Gratue typed o printed name of representation OFFICERS AN | ID DIRECTORS        | 13.   |  | ADDITIONS/CHANGES TO OFF   |                  | ORECTO           | RS IN 12               |
| TiTLE   | Brotman. David  | ☐ DELETE            | 1 1 THE   |  |  | L                | Gnange           | L] Addition            |
| NAME  | 909 RYANWOOD DR   |                     | 1.2 NAM:  |  |  |                  |                  |                        |
| STREET ADDRESS  | WEST PALM BEACH FL 33                                     | 1413                |   | ET ADDRESS   |  |                  |                  |                        |
|   |   |                     | 14 CITY   |  |  |                  |                  | Addit on               |
| CITY-ST-ZIP   | D D   |                     | 2.1 01  | F I  |  |                  | Change           |                        |
| TITLE   | _   | DELET!              | 2 1 TIF, I<br>2 2 NAM   |  |  |                  | Change           |                        |
| TITLE<br>NAME   | D   |                     | 2.2 NAM-  | £  |  |                  | Change           |                        |
| TITLE NAME STREET ADDRESS   | D<br>Brotman, Michael                                     |                     | 2.2 NAM-<br>2.3 STRE  | E<br>ET ADORESS  |  |                  | Change           |                        |
| TITLE<br>NAME   | BROTMAN, MICHAEL<br>14503 68 ST N                         |                     | 2.2 NAM-  | E<br>ETADORESS<br>-ST ZIP  |  |                  | Change<br>Change |                        |
| TITLE NAME STREET ADDRESS CATY - ST - ZIP   | BROTMAN, MICHAEL<br>14503 68 ST N                         | DELÉTÉ              | 2 2 NAM-<br>2 3 STRE<br>2 4 CHY   | E<br>ELADORESS :<br>-SL ZIE<br>E   |  |                  |                  |                        |
| TITLE NAME STREEL ADDRESS CITY - ST - ZIP TITLE   | BROTMAN, MICHAEL<br>14503 68 ST N                         | DELÉTÉ              | 2 2 NAM<br>2 3 STRE<br>2 4 CHY<br>3 1 TTL<br>3 2 NAM  | E<br>ELADORESS :<br>-SL ZIE<br>E   |  |                  |                  | Addition               |
| TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME   | BROTMAN, MICHAEL<br>14503 68 ST N                         | ☐ DELÉTÉ            | 22 NAM<br>23 STRE<br>24 CHY<br>3 1 TTL<br>32 NAM<br>33 STRI   | E<br>EFFADORESS<br>-SF-ZIP<br>E  |  |                  | Change           | Addition               |
| TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS   | BROTMAN, MICHAEL<br>14503 68 ST N                         | DELÉTÉ              | 22 NAM<br>23 STRE<br>24 CHY<br>3 1 TTL<br>32 NAM<br>33 STRI   | E FET ADDRESSST-ZIP E E FET ADDRESSST-ZIP  |  |                  |                  | Addition               |
| TITLE  NAME  STREET ADDRESS  C-TY - ST - ZIP  TITLE  NAME  STREET ADDRESS  C11 - ST - ZIP   | BROTMAN, MICHAEL<br>14503 68 ST N                         | ☐ DELÉTÉ            | 2 2 NAM<br>2 3 STRE<br>2 4 CHY<br>3 1 TTL<br>3 2 NAM<br>3 3 STRI<br>3 4 CHY<br>4 1 TTL<br>4 2 NAM   | E ET ADDRESS -SL ZIP E E EET ADDRESS -SL-ZIP F   |  |                  | Change           | Addition               |
| TILE  NAME  STREEL ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  | BROTMAN, MICHAEL<br>14503 68 ST N                         | ☐ DELÉTÉ            | 2 2 NAM<br>2 3 STRE<br>2 4 CHY<br>3 1 TTL<br>3 2 NAM<br>3 3 STRI<br>3 4 CHY<br>4 1 TIL<br>4 2 NAM<br>4 3 STRE   | E ET ADDRESS  -ST_ZIP E E EET ADDRESS -ST-ZIP F EET ADDRESS  |  |                  | Change           | Addition               |
| THE NAME STREET ADDRESS CITY - ST - ZIP THE NAME STREET ADDRESS CITY - ST - ZIP THE NAME STREET ADDRESS CITY - ST - ZIP THE NAME STREET ADDRESS CITY - ST - ZIP   | BROTMAN, MICHAEL<br>14503 68 ST N                         | DELETE              | 2 2 NAM<br>2 3 STRE<br>2 4 CHY<br>3 1 TTL<br>3 2 NAM<br>3 3 STRI<br>3 4 CHY<br>4 1 TH<br>4 2 NAM<br>4 3 STRE<br>4 4 CHY   | E ET ADDRESS -SL ZIP E E EET ADDRESS -SL-ZIP F IE EET ADDRESS -SL-ZIP F IE EET ADDRESS -SL-ZIP F III   |  |                  | Change<br>Change | Addition               |
| THE NAME STREET ADDRESS CITY-ST-ZIP THUE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS STREET ADDRESS   | BROTMAN, MICHAEL<br>14503 68 ST N                         | ☐ DELÉTÉ            | 2 2 NAM<br>2 3 STRE<br>2 4 CHY<br>3 1 T TL<br>3 2 NAM<br>3 3 STRI<br>3 4 CHY<br>4 1 TH.<br>4 2 NAM<br>4 3 STRE<br>4 4 CHY<br>5 1 THL  | E ET ADDRESS -ST ZIP E E EET ADDRESS -ST-ZIP F EET ADDRESS -ST-ZIP EET ADDRESS -ST-ZIP EET ADDRESS   |  |                  | Change           | Addition               |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | BROTMAN, MICHAEL<br>14503 68 ST N                         | DELETE              | 2 2 NAM<br>2 3 STRE<br>2 4 CHY<br>3 1 TTL<br>3 2 NAM<br>3 3 STRI<br>3 4 CHY<br>4 1 TH.<br>4 2 NAM<br>4 3 STRE<br>4 4 CHY<br>5 1 THL   | E ET ADDRESS -SL-ZIP E EET ADDRESS -SL-ZIP F EET ADDRESS -SL-ZIP EET ADDRESS -SL-ZIP EET ADDRESS -SL-ZIP -ET ADDRESS   |  |                  | Change<br>Change | Addition               |
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| TITLE  NAME  STREET ADDRESS  CATY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE       | BROTMAN, MICHAEL<br>14503 68 ST N                         | DELETE              | 2 2 NAM<br>2 3 STRE<br>2 4 CHY<br>3 1 TTL<br>3 2 NAM<br>3 3 STRI<br>3 4 CHY<br>4 1 THL<br>4 2 NAM<br>4 3 STRE<br>4 4 CHY<br>5 1 THL<br>5 2 NAM<br>5 3 STRI<br>5 4 CHY<br>6 1 THL                        | E ET ADDRESS -ST ZIP E E EET ADDRESS -ST-ZIP F EET ADDRESS -ST-ZIP EET ADDRESS |  |                  | Change<br>Change | Addition               |
| TITLE  NAME  STREET ADDRESS  CATY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME | BROTMAN, MICHAEL<br>14503 68 ST N                         | DELETE              | 2 2 NAM<br>2 3 STRE<br>2 4 CHY<br>3 1 TTL<br>3 2 NAM<br>3 3 STRI<br>3 4 CHY<br>4 1 THL<br>4 2 NAM<br>4 3 STRE<br>4 4 CHY<br>5 1 THL<br>5 2 NAM<br>5 3 STRI<br>5 4 CHY<br>6 1 THL                        | E ET ADDRESS -ST ZIP E E EET ADDRESS -ST-ZIP F EET ADDRESS -ST-ZIP EET ADDRESS -ST-ZIP E EET ADDRESS -ST-ZIP E EFT ADDRESS -ST-ZIP E   |  |                  | Change Change    | Addition               |
| TITLE  NAME  STREET ADDRESS  CATY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE                           | BROTMAN, MICHAEL<br>14503 68 ST N                         | DELETE              | 2 2 NAM<br>2 3 SIRE<br>2 4 CHY<br>3 1 TTL<br>3 2 NAM<br>3 3 SIRI<br>3 4 CHY<br>4 1 THL<br>4 2 NAM<br>4 3 SIRE<br>4 4 CHY<br>5 1 THL<br>5 2 NAM<br>5 3 SIRE<br>5 4 CHY<br>6 1 THL<br>6 2 NAM<br>6 3 SIRI | E ET ADDRESS -ST ZIP E E EET ADDRESS -ST-ZIP F EET ADDRESS -ST-ZIP EET ADDRESS |  |                  | Change Change    | Addition               |

ue resum on supprenenter annue report is true and each mae and mainly signature shall have the same legal effect as it made that oration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name of payatachaper) with an address. oath; that I am an officer or director of the corp appears in Block 12 or Block 13 if changes or